

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	2-21-01
FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 II ..... Allowed  
 (Through numeral) Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	2/21/01
2	2/21/01
3	2/21/01
4	2/21/01
5	2/21/01
6	2/21/01
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8	2/21/01
9	2/21/01
10	2/21/01
11	2/21/01
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43	2/21/01
44	2/21/01
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47	2/21/01
48	2/21/01
49	2/21/01
50	2/21/01

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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